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7590

04/19/2004

David L. Howard
Senniger, Powers, Leavitt & Roedel
One Metropolitan Square, 16th Floor
St. Louis, MO 63102



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Denise L. Wright (Depositor's name)
Denise L. Wright (Signature)
June 28, 2004 (Date)

06/30/2004 HLE444 00000009 09832848

01 FC:1501 1330.00 OP
02 FC:1504 300.00 OP
03 FC:8001 30.00 OP

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/832,848 | 04/12/2001 | Richard D. Bucholz | 06148.0026-03 | 2372 |

TITLE OF INVENTION: SURGICAL NAVIGATION SYSTEMS INCLUDING REFERENCE AND LOCALIZATION FRAMES

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 07/19/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|--------------------------|----------|----------------|
| MANTIS MERCADER, ELENI M | 3737 | 600-407000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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1 Senniger, Powers,
Leavitt & Roedel
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

- 1) Surgical Navigation Technologies, Inc. Broomfield, Colorado
2) St. Louis University St. Louis, Missouri

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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